PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10743990

| (Column 1) (Column 2) | | | | | | | | TYPE TYPE | | | OR SMALL ENTITY | | |
|---|---|----------------------------------|---------------------------------------|-------------------------------|-------------------------------|------------------|--------------|-----------|------------------------|----|-------------------------|------------------------|--|
| TOTAL CLAIMS | | | 6 | | | | | RATE | FEE | | RATE | FEE | |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | ВА | SIC FEE | 385.00 | OR | BASIC FEE | 770.00 | |
| TOTAL CHARGEABLE CLAIMS | | | 6 minus 20= | | * Ø | | | X\$ 9= | | OR | X\$18= | | |
| INDEPENDENT CLAIMS | | | 3 minus 3 = | | * Ø | | | X43= | | OR | X86= | | |
| MU | LTIPLE DEPEN | DENT CLAIM PI | RESENT | | | | | 145= | | OR | +290= | | |
| * If | the difference | in column 1 is | less than zero, enter "0" in column 2 | | | | <u> </u> | OTAL | | OR | TOTAL | | |
| | C | LAIMS AS A | MENDED - PART II | | | | SMALL ENTITY | | | | OTHER THAN SMALL ENTITY | | |
| | | (Column 1) | | (Colur | | (Column 3) | S | MALL | | OR | SWALL | | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER OUSLY | PRESENT EXTRA | ı | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | | |
| | Independent | * | Minus | | | = | | X43= | | OR | X86= | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | +145= | | OR | +290= | | |
| TOTAL OR TOTAL ADDIT. FEE | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| _ | | | | HEST | (Coldinity) | | | ADDI- | | | ADDI- | | |
| AMENDMENT B | | REMAINIŅG AFTER AMENDMENT | | PREVI | IBER OUSLY FOR | PRESENT EXTRA | | RATE | TIONAL FEE | | RATE | TIONAL FEE | |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | | |
| | Independent | * | Minus | *** | T C) AINA | | | X43= | | OR | X86= | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +145= | | OR | +290= | | |
| TOTAL ADDIT. FEE | | | | | | | | | | OR | TOTAL ADDIT. FEE | | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | | |
| AMENDMENT C | ` | CLAIMS REMAINING AFTER AMENDMENT | | HIGI NUM PREVI | HEST MBER IOUSLY FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | | |
| | Independent | * | Minus | *** | T OL AIR | = . | | X43= | | OR | X86= | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145= | | | | | | | | | OR | +290= | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | | | | | | |
| ** | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |